



Intern Application

**Albany Parks and Recreation-P.O. Box 490-Albany, OR 97321
541-917-7771**

The Program

The City of Albany Parks & Recreation Department Intern Program was created to provide opportunities for college students to gain firsthand knowledge and understanding of park and recreation processes through pre-professional work experience. The Intern Program offers administrative internships to students in many areas including summer camps, recreation planning, sports, park maintenance, special events, senior services and graphic services.

Duration

Exact starting and ending dates will be arranged between the intern and the supervisor. All internship hours will be arranged between the intern and the supervisor.

College Credit

Many schools offer academic credit for internships. To determine if your school offers credit and/or the requirements for obtaining credit, you must contact your schools career placement office or your academic advisor. We will be happy to work with you as a partner agency.

Compensation

Most internships are not paid positions. Your internship application and agreement should not be construed as an offer of paid employment.

I am applying for an internship that will begin _____ and ends _____.

Date Date

Number of Hours Requested _____ Days of Week Requested _____

The following information must accompany the internship application:

- Current Resume noting prior work experience
- List of strengths and skills areas as they would apply to your internship
- List of your Goals and Objectives for your Internship Experience.
- A statement of why you are interested in completing your internship with Albany Parks & Recreation Department.

*Have you even been convicted of a misdemeanor or felony? _____ Yes _____ No

*Do you have any pending charges against you? _____ Yes _____ No

If yes, charge: _____ Felony _____ Misdemeanor

*This information may be verified. Affirmative answers will not necessarily exclude you from internship; however, the information will be considered insofar as it relates to the assigned areas of your internship.

Name: _____
Last First Middle

Date available to begin: _____

School Home Address: _____
Street or P.O. Box City State Zip

Permanent Home Address: _____
Street or P.O. Box City State Zip

Personal Email Address: _____ Date of Birth _____

School Home Phone: () _____ Permanent Home Phone: () _____

Cell Phone: () _____

University/College/Vocational/Technical School you are currently attending:

Educational status by start of internship
Freshman _____ Sophomore _____ Junior _____ Senior _____ Graduating Student _____

Major(s): _____

Experience/Skills/Interests:

References:
Name _____ Phone _____ Relationship _____
Name _____ Phone _____ Relationship _____
Name _____ Phone _____ Relationship _____

I certify that the information I have provided is true, correct, and complete to the best of my knowledge. I understand acceptance of an internship position is a commitment on my part to the number of hours of service agreed upon. I understand that I am not an employee of the City of Albany, and that any duties that I perform are for my internship. I agree to abide by the procedures set forth by the City of Albany for my assigned work duties. I also understand that it is my responsibility to update any address, emergency, or other changes to the information on this form.

By my signature, I authorize the City of Albany to conduct a background check of my driving record and my criminal record.

Signature _____ Date _____

Return completed application and requested information to:
Lynne Jamison, Albany Parks & Recreation, P.O. Box 490, Albany, OR 97321
541/917-7771 lynne.jamison@cityofalbany.net